

PERMITTEE NAME/ADDRESS (Include Facility Name and Location if different)

NAME - CYPRUS THOMPSON CREEK MINING CO

ADDRESS P.O. BOX 62

CLAYTON

ID 83227

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

ID0025402

PERMIT NUMBER

001 A

DISCHARGE NUMBER

F - FINAL

DISCHARGE TO BUCKSKIN CREEK

Form Approved

OMB No. 2040-0004

Expires 3-31-88

FACILITY

LOCATION Pat Fitch

ATTN: CHAIRMAN, VICE PRES/GEN MGR

MONITORING PERIOD

FROM YEAR 89 MO 02 DAY 01 TO YEAR 89 MO 02 DAY 28  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 03)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		---	*****	---		---	---	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU	---	WEEKLY GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	---	---		---		
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	20 30DA AVG	30 DAILY MX	MG/L	---	WEEKLY GRAB	
ARSENIC, TOTAL (AS AS)	SAMPLE MEASUREMENT	*****	*****		*****	*****	---		---		
01002 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.490 DAILY MX	MG/L	---	ONCE/ GRAB MONTH	
CADMIUM, TOTAL (AS CD)	SAMPLE MEASUREMENT	*****	*****		*****	*****	---		---		
01027 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.0053 DAILY MX	MG/L	---	ONCE/ GRAB MONTH	
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****		*****	*****	---		---		
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.0245 DAILY MX	MG/L	---	ONCE/ GRAB MONTH	
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	*****	*****		*****	*****	---		---		
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.0589 DAILY MX	MG/L	---	ONCE/ GRAB MONTH	
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	*****	*****		*****	*****	---		---		
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.165 DAILY MX	MG/L	---	ONCE/ GRAB MONTH	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
P.H. Fitch							208 838 2200		89 03 10		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE		NUMBER		

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)  
NAME CYPRUS THOMPSON CREEK MINING C  
ADDRESS P.O. BOX 62  
CLAYTON ID 83227

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

ID0025402  
PERMIT NUMBER

001 A  
DISCHARGE NUMBER

F - FINAL  
DISCHARGE TO BUCKSKIN CREEK

Form Approved  
OMB No. 2040-0004  
Expires 3-31-88

FACILITY  
LOCATION Pat Fitch  
ATTN: CHRIS JONES, VICE PRES/GEN MGR

MONITORING PERIOD  
FROM YEAR 89 MO 02 DAY 01 TO YEAR 89 MO 02 DAY 28  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

MAJOR (SUBR 03)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0	0		*****	*****	*****	—	daily	
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT		*****	*****	*****	—	DAILY	
EFFLUENT GROSS VALUE		30DA AVG	DAILY MX	MGD				****		
MERCURY, TOTAL (AS HG)	SAMPLE MEASUREMENT	*****	*****		*****	*****	---	—	---	
71900 1 0 0	PERMIT REQUIREMENT	*****	*****	****	*****	*****	.0002	—	ONCE/	GRAB
EFFLUENT GROSS VALUE				****			DAILY MX		MONTH	
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

Zero Discharge

RECEIVED  
MAR 14 1989

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	WATER COMPLIANCE EPA REGION 10	TELEPHONE	DATE
P.H. Fitch		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	208 838-2200	89 03 10
TYPED OR PRINTED		OFFICER OR AUTHORIZED AGENT	AREA CODE NUMBER	YEAR MO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NAME CYPRUS THOMPSON CREEK MINING C

ADDRESS P.O. BOX 62

CLAYTON

ID 83227

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

ID0025402

002 A

PERMIT NUMBER

DISCHARGE NUMBER

Form Approved

OMB No. 2040-0004

Expires 3-31-88

F - FINAL

DISCHARGE TO PAT HUGHES CREEK

FACILITY

LOCATION

ATTN: P.H. FITCH, VICE PRES/GEN MGR

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	89	02	01		89	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAJOR (SUBR 03)

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****			*****				
00400 1 0 0	PERMIT REQUIREMENT	*****	*****	****	6.0	6.68	7.17	0	weekly grab	
EFFLUENT GROSS VALU				****	MINIMUM		MAXIMUM	SU		
SOLIDS, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****					
SUSPENDED	PERMIT REQUIREMENT	*****	*****	****	*****	4	5	0	weekly grab	
00530 1 0 0				****		20	30		WEEKLY GRAB	
EFFLUENT GROSS VALU				****		30 DA AVG	DAILY MX	MG/L		
ARSENIC, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****				
(AS AS)	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.005	0	once/mo grab	
01002 1 0 0				****			0.490		ONCE/ GRAB	
EFFLUENT GROSS VALU				****			DAILY MX	MG/L	MONTH	
CADMIUM, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****				
(AS CD)	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.005	0	once/mo grab	
01027 1 0 0				****			0.0053		ONCE/ GRAB	
EFFLUENT GROSS VALU				****			DAILY MX	MG/L	MONTH	
COPPER, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****				
(AS CU)	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.005	0	once/mo grab	
01042 1 0 0				****			0.0245		ONCE/ GRAB	
EFFLUENT GROSS VALU				****			DAILY MX	MG/L	MONTH	
LEAD, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****				
(AS PB)	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.05	0	once/mo grab	
01051 1 0 0				****			0.0589		ONCE/ GRAB	
EFFLUENT GROSS VALU				****			DAILY MX	MG/L	MONTH	
ZINC, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	*****				
(AS ZN)	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.055	0	once/mo grab	
01092 1 0 0				****			0.165		ONCE/ GRAB	
EFFLUENT GROSS VALU				****			DAILY MX	MG/L	MONTH	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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P.H. Fitch

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



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NAME CYPRUS THOMPSON CREEK MINING C  
ADDRESS P.O. BOX 62  
CLAYTON ID 83227  
FACILITY  
LOCATION Pat Fitch  
ATTN: CHRIS JAMES, VICE PRES/GEN MGR

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DISCHARGE MONITORING REPORT (DMR)

100025402  
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OMB No. 2040-0004  
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MONITORING PERIOD								
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		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW, IN CONDUIT OR THRU TREATMENT PLAN 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.063	0.166		*****	*****	*****		0	daily	
	PERMIT REQUIREMENT	REPORT 30DA AVG	REPORT DAILY MX	MGD	*****	*****	*****	****		DAILY	
MERCURY, TOTAL (AS HG) 71900 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.0002		0	once/mo grab	
	PERMIT REQUIREMENT	*****	*****	****	*****	*****	0.0002 DAILY MX	MG/L		ONCE/ GRAB MONTH	
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

RECEIVED  
MAR 14 1989  
WATER COMPLIANCE SECTION  
EPA - REGION 10

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		TELEPHONE				DATE		
P.H. Fitch TYPED OR PRINTED		838-2200				89	03	10
		208	AREA CODE	NUMBER		YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)